



OFFICIAL MEDIA RELEASE

KENT COUNTY SHERIFF DEPARTMENT



Traffic Crash Supplement

Incident # 13-132305 Date: 07/22/2013 Time of Incident: PIAC Township: 08 - Cascade
Type of Incident: Personal Injury Crash Location: Thornapple River Dr/Cascade Rd
Reporting Officer: Deputy Dannenberg Assisting Departments: Cascade Fire Dept, Life EMS
Release Completed By: Sgt J Kelley

Fire ☐ Ambulance ☐ Helicopter ☐ Other Police Agencies ☐ Utilities etc. ☐

ALCOHOL Contributing Factor?

Y ☐ N ☒ UNK ☐

Vehicles

ALCOHOL Contributing Factor?

Y ☐ N ☒ UNK ☐

Veh: 1 Make: Honda Model: Odyssey Yr: 2008
Driver: Samukatha Chermala Age: 35
City: Ada Twp: Ada State: MI
Injuries: None Seatbelt: Y ☒ N ☐ UNK ☐
Direction of Travel: S/B
Hospital: _____ Transport By: _____

Veh: _____ Make: _____ Model: _____ Yr: _____
Driver: Pedestrian...Robert Pankhurst Age: 90
City: Ada Twp: Ada State: MI
Injuries: Life Threatening Seatbelt: Y ☐ N ☐ UNK ☐
Direction of Travel: _____
Hospital: Spectrum/BW/DT Transport By: Life EMS

Relatives Notified ☒ YES Names Can Be Released ☒ YES

Relatives Notified ☒ YES Names Can Be Released ☒ YES

Passengers

Name: _____ Age: _____
City: _____ Twp: _____ State: _____
Injuries: _____ Seatbelt: ☐
Hospital: _____ Transport By: _____

Passengers

Name: _____ Age: _____
City: _____ Twp: _____ State: _____
Injuries: _____ Seatbelt: ☐
Hospital: _____ Transport By: _____

Name: _____ Age: _____
City: _____ Twp: _____ State: _____
Injuries: _____ Seatbelt: ☐
Hospital: _____ Transport By: _____

Name: _____ Age: _____
City: _____ Twp: _____ State: _____
Injuries: _____ Seatbelt: ☐
Hospital: _____ Transport By: _____

Name: _____ Age: _____
City: _____ Twp: _____ State: _____
Injuries: _____ Seatbelt: ☐
Hospital: _____ Transport By: _____

Name: _____ Age: _____
City: _____ Twp: _____ State: _____
Injuries: _____ Seatbelt: ☐
Hospital: _____ Transport By: _____

Name: _____ Age: _____
City: _____ Twp: _____ State: _____
Injuries: _____ Seatbelt: ☐
Hospital: _____ Transport By: _____

Name: _____ Age: _____
City: _____ Twp: _____ State: _____
Injuries: _____ Seatbelt: ☐
Hospital: _____ Transport By: _____